FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Expires:

OMB Number:

3235-0076 May 31, 2005

Estimated average burden

hours per response......1

OMB APPROVAL



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION DIS SECTION 4(6), AND/OR

FORM D

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE	ONLY
Prefix	Serial
DATE REC	EIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock Financing	1107843
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Qualys, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 1600 Bridge Parkway, Redwood Shores, CA 94065	Telephone Number (Including Area Code) (650) 801-6100
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Provider of network security audits and vulnerability management	PROCESSED
Type of Business Organization corporation	NOV 2 2 2004 E
Actual or Estimated Date of Incorporation or Organization: Month Year 1 2 9 9 2 Service Abbreviation for S CN for Canada; FN for other foreign jurisdiction)	HINANCIAL Actual Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

__ ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership is Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Philippe Courtot	
	V
Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Bridge Parkway, Redwood Shores, CA 94065	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Gerhard Eschelbeck	
Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Bridge Parkway, Redwood Shores, CA 94065	
	Concret and/or
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Eric Saltzman	
Business or Residence Address (Number and Street, City, State, Zip Code)	
1600 Bridge Parkway, Redwood Shores, CA 94065	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Donald Dixon	
Business or Residence Address (Number and Street, City, State, Zip Code)	
505 Hamilton Avenue, Suite 200, Palo Alto, CA 94301	
Check Box(es) that Apply:	General and/or Managing Partner
Full Name (Last name first, if individual)	
Howard Schmidt	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Qualys, Inc., 1600 Bridge Parkway, Redwood Shores, ĆA 94065	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Alex Vieux	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Qualys, Inc., 1600 Bridge Parkway, Redwood Shores, CA 94065	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	3 8 3
Yves B. Sisteron	
Business or Residence Address (Number and Street, City, State, Zip Code)	
2121 Avenue of the Stars, Suite 1630, Los Angeles, CA 90067	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

	A. BASIC ID	ENTIFICATION DATA	
2. Enter the information requested for the following the power of the issuer, if the issuer has been been been been been been been bee	s been organized within the vote or dispose, or direct th orate issuers and of corporat	past five years; e vote or disposition of, 10% or more of a class e general and managing partners of partnership	of equity securities of the issuer; issuers; and
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Trident Capital Partners			
Business or Residence Address (Number and Street,	, City, State, Zip Code)		
505 Hamilton Avenue; Suite 200, Palo Alto, CA	94301		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
GRP Partners			
Business or Residence Address (Number and Street,	, City, State, Zip Code)		
2121 Avenue of the Stars, Suite 1630, Los Angele	es, CA 90067		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	•		
Philippe Langlois			
Business or Residence Address (Number and Street	, City, State, Zip Code)		
c/o Qualys, Inc., 1600 Bridge Parkway, Redwood	Shores, CA 94065		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Gilles Samoun			
Business or Residence Address (Number and Street	, City, State, Zip Code)		
c/o Qualys, Inc., 1600 Bridge Parkway, Redwood	Shores, CA 94065		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)			•
Mercury Interactive Ventures			
Business or Residence Address (Number and Street	, City, State, Zip Code)		
379 North Whisman Road, Mountain View, CA 9	94043		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
ABS Ventures			
Business or Residence Address (Number and Street	, City, State, Zip Code)		
225 Franklin St., 25th Fl., Boston, MA, 02110			
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)	-		
Business or Residence Address (Number and Street	, City, State, Zip Code)		
(Use blank	sheet, or copy and use add	ditional copies of this sheet, as necessary)	

					B.	INFOR	MATION A	ABOUT OF	FERING				
1. F	lac the i	iscuer cold	or does the is	squer intend t	o sell to no	n-accredited	investors in t	his offering?				Yes	No ⊠
1. 1	ias uic i	issuer soru,	or does the is	saci intena t					nder ULOE.				<u> </u>
2. V	What is t	the minimu	m investmen	t that will be	accepted fro	m any indivi	dual?					\$	N/A_
3. I	oes the	offering ne	ermit joint ov	vnershin of a	single unit?							Yes ⊠	No
			n requested f									_	
			licitation of p broker or dea										
t	han five	(5) persons	s to be listed:	are associated	persons of	such a broker	or dealer, y	ou may set fo	rth the inforn	nation for the	at broker or		
	lealer or ame (La		st, if individu	ıal)					-			<u> </u>	
													
Busine	ess or Re	esidence Ac	ddress (Numl	er and Stree	t, City, State	, Zip Code)							
Name	of Asso	ciated Brok	er or Dealer				T de la companya de l						
States	in Whic	ch Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers				. ,			
(Ch	eck "Al	l States" or	check indivi	duals States)				······				□ A	1 States
[A	.L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[1]	_]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[N	1T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R	[]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	ast name fir	st, if individu	ıal)		···			<u> </u>				
										· · · · · · · · · · · · · · · · · · ·			
Busine	ess or Re	esidence A	ddress (Numl	per and Stree	t, City, State	, Zip Code)							
Name	of Asso	ciated Brok	cer or Dealer	-				-		- 1000			
States	in Whic	h Person L	isted Has Sol	licited or Inte	nds to Solic	it Purchasers		37 (07 JUL)		•			
(Ch	eck "Al	l States" or	check indivi	duals States)			••••		***************************************			□ A	II States
[A	L)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[1]	_]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[N	1T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R	.1]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	ast name fir	st, if individu	ıal)				<u> </u>			·		
Busine	ess or Re	esidence Ad	ddress (Numb	per and Stree	t, City, State	, Zip Code)							
Name	of Asso	ciated Brok	er or Dealer				···						<u> </u>
					1								
			isted Has Sol check indivi										II Ctatas
(Cn [A		[AK]	[AZ]	duais States) [AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	A [HI]	II States [ID]
[II]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[DE]	[[MA]	[FL] [MI]	[MN]	[MS]	[MO]
	-1 1T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	-								is sheet, as n				

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
•	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		A manual A long do
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	-	\$
	Equity	\$5,600,000.23	\$_5,600,000.23
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	· \$	\$
	Other (Specify)		\$
	Total		\$_5,600,000.23
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	10	\$_5,600,000.23
	Non-accredited Investors	0	\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$50,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Filing fees	\boxtimes	\$300.00
	Total	— ⊠	\$50,300.00
			

	C. OFFER	ING PRICE, NUMBER OF INVESTORS, EX	PENSES AND USE OF PROCEEDS	3
	total expenses furnished in response to	gregate offering price given in response to Part C Part C - Question 4.a. This difference is the "adju	isted gross	\$ <u>5,549,700.23</u>
5.	the purposes shown. If the amount for a	ed gross proceeds to the issuer used or proposed to any purpose is not known, furnish an estimate and c syments listed must equal the adjusted gross proceed to above.	heck the box to the	
			Payments to Officers, Directors Affiliates	& Payments To Others
	Salaries and fees			D S
	Purchase of real estate		s	
	Purchase, rental or leasing and installa	tion of machinery and equipment	s	s
	Construction or leasing of plant building	ngs and facilities	s	
	Acquisition of other businesses (includused in exchange for the assets or secu	ling the value of securities involved in this offerin rities of another issuer pursuant to a merger)	g that may be S	🗆 \$
	Repayment of indebtedness		s	s
	Working capital	,		
	Other (specify):		s	
	Column Totals		s	⊠ \$ <u>5,549,700.23</u>
	Total Payments Listed (column to	otals added)	\(\s\)	5,549,700.23
		D. FEDERAL SIGNATI	JRE	
unde		ned by the undersigned duly authorized person. If this ecurities and Exchange Commission, upon written rely of Rule 502.		
	er (Print or Type)	Signature	Date	
	lys, Inc. ne of Signer (Print or Type)	Title of Signer (Print or Type)	November 16, 2004	
Nan	- · · · · · · · · · · · · · · · · · · ·	Chief Financial Officer		